PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

(Column 1) (Column 2)								SMALL ENTITY TYPE		ΩB	OR SMALL ENTITY	
TOTAL CLAIMS			17		COOK	11111 2)			FEE	OR 7		
								RATE		-	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			/	nus 20=	*			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			3 minus 3 = 1					X43=		OR	X86=	
ML	ILTIPLE DEPE	NDENT CLAIM P	RESENT					+145=		OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in column 2							•	TOTAL		OR	TOTAL	770
CLAIMS AS AMENDED - PART II										4	OTHER	
		(Column 1)		(Colun		(Column 3)	_	SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=	·	OR	. X\$18=	
\ME	Independent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	
								TOTAL			TOTAL	
								DDIT. FEE		OR	ADDIT. FEE	
		(Column 1) CLAIMS	· ·	(Colum		(Column 3)	ır		ADDI-			ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAL		. RATE	TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Ind pendent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						!	445		li	.000	
·								+145=		OR	+290=	
								TOTAL DDIT. FEE		OR ,	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUMB PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							.145			.000	
* If the ntry in column 1 is less than the ntry in column 2, write "0" in column 3.								+145= TOTAL		OR	+290=	
** }	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."								,	OR ,	TOTAL ADDIT. FEE	
		nber Pr viously Paid					r foun	d in the app	ropriate box	in colu	umn 1.	